2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000053114

1. Entity Name OBH1509, LLC



FILED Mar 03, 2006 08:00 AM Secretary of State

Principal Place of Business

NAME STREET ADDRESS CITY-ST-ZIP

C/O FROMBERG, PERLOW & KORNIK, P.A. 18901 NE 29TH AVE, STE 100 AVENTURA, FL 33180 Malling Address

C/O FROMBERG, PERLOW & KORNIK, P.A. 18901 NE 29TH AVE, STE 100 AVENTURA, FL 33180



02012006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1051569 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DADE COUNTY CORPORATE AGENTS, INC. 18901 NE 29TH AVE, STE 100 AVENTURA, FL 33180

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating): OATE				
Filing Fee is \$50.00 Due by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS GITY-57-27P	MGR RODRIGUEZ, ANA LUZ C 18901 NE 29TH AVE, STE 100 AVENTURA, FL 33180		11080410455033 44/15/06-30039-824 5 0.0 0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	·	1 101 00 00000	
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TITLE HAME STREET ADORESS CITY-ST-ZIP				
TITLE				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE: X LOGA ROLL ON ANA LUZ C. RODRIGUEZ MGR. 02/01/06

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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